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CONFIRMATION NO. 8216

<b>SERIAL NUMBER</b> 10/825,952	<b>FILING OR 371(c) DATE</b> 04/16/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3768	<b>ATTORNEY DOCKET NO.</b> END5311USNP
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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 06/25/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 34	<b>INDEPENDENT CLAIMS</b> 7
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

27777

**TITLE**

MEDICAL SYSTEM HAVING MULTIPLE ULTRASOUND TRANSDUCERS OR AN ULTRASOUND  
 TRANSDUCER AND AN RF ELECTRODE

<b>FILING FEE RECEIVED</b> 1796	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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